UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

1294934

OMB APPROVAL

OMB Number: 3235-0076 Expires: May 31, 2005 Estimated average burden hours per form......1

SEC USE ONLY						
Prefix	Ser	ial 📝				
DAT	TE RECEIVED					

Name of Offering (check if this is an	amendment and name has changed,	and indicate change.)								
Common Stock					·					
Filing Under (Check box(es) that apply):	☐ Rule 504	Rule 505	Rule 506	• ☐ Section 4(6)	☐ ULOE					
Type of Filing:	X	New Filing		Amendment						
A. BASIC IDENTIFICATION DATA										
1. Enter the information requested abo	ut the issuer									
Name of Issuer (check if this is an am	endment and name has changed, an	d indicate change.)								
Bighorn Air, Inc.				_						
Address of Executive Offices	(Number and Street	, City, State, Zip Code) Telephone Numbe	r (Including Area Cod	ie)					
2825 E. Cottonwood Parkway, #500, Salt Lake City, UT 84121 909-858-4900										
Address of Principal Business Operations (if different from Executive Offices)	s (Number and Street, City, State, Zi	p Code)	Telepho Taylor	Graduating Area Coo	ie)					
Brief Description of Business Aircraft rental		Ş.	Λ	8 2004						
Type of Business Organization			HOM	SON						
	☐ limited partnership, already for	ormed \	J PINAN	Chather (please spec	ify):					
☐ business trust	☐ limited partnership, to be form	ned								
Actual or Estimated Date of Incorporatio	n or Organization:	Month March	<u>Year</u> 2004	☑ Actual	☐ Estimated					
Jurisdiction of Incorporation or Organiza	•									
	CN for Canada; FN for oth	er foreign jurisdiction)			DE					

GENERAL INSTRUCTIONS

04040661

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA

- 2: Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	☐ Promoter	🗷 Beneficial Owner	Executive Officer	E Director	General and/or Managing Partner							
	Full Name (Last name first, if individual)											
Bivens, Rudie												
Business or Residence Address (Number and Street, City, State, Zip Code) 2825 E. Cottonwood Parkway, #500, Salt Lake City, UT 84121												
Check		Beneficial Owner	Wr or	[6] P.:	П С1/							
Box(es) that Apply:	Promoter	Beneficial Owner	■ Executive Officer	☑ Director	General and/or Managing Partner							
Full Name (Last name first, if individual) Drummond, Daniel												
Drummond, Daniel Business or Residence Address (Number and Street, City, State, Zip Code) 2825 E. Cottonwood Parkway, #500, Salt Lake City, UT 84121												
Check Boxes that Apply:	☐ Promoter	E Beneficial Owner	Executive Officer	☒ Director	General and/or Managing Partner							
Full Name (Last Jenson, Victori	name first, if individual)			······································								
	idence Address (Number and wood Parkway, #500, Salt I	Street, City, State, Zip Code) ake City, UT 84121										
Check Boxes that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner							
Full Name (Last	name first, if individual)											
Business or Res	idence Address (Number and	Street, City, State, Zip Code)										
Check Boxes that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner							
Full Name (Last	name first, if individual)											
Business or Res	idence Address (Number and	Street, City, State, Zip Code)										
Check Boxes that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner							
Full Name (Last	name first, if individual)											
Business or Res	idence Address (Number and	Street, City, State, Zip Code)										
Check Boxes that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner							
Full Name (Last	t name first, if individual)											
Business or Residence Address (Number and Street, City, State, Zip Code)												
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner							
Full Name (Last	t name first, if individual)											
Business or Res	Business or Residence Address (Number and Street, City, State, Zip Code)											

					В	. INFORM	ATION AB	OUT OFFE	RING				
1.	Has the is	suer sold, or	does the issue	er intend to				_	under ULOE			Yes N	lo <u>X</u>
What is the minimum investment that will be accepted from any individual?										\$	N/A		
3. Does the offering permit joint ownership of a single unit?										Yes N	lo <u>X</u>		
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.													
Full Name (Last name first, if individual)													
Business or Residence Address (Number and Street, City, State, Zip Code)													
Nar	Name of Associated Broker or Dealer												
		44.5	ed Has Solici								,		
(Ch	eck "All St	ates" or chec	k individual :	States)				,					All States
[A]	-1	[AK]	[AZ]	[AR] ··	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]		[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[M]	-	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]		[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[VA]	[WV]	[WI]	[WY]	[PR]
Full	Full Name (Last name first, if individual)												
Bus	iness or Re	sidence Add	ress (Number	and Street,	City, State	, Zip Code)		,					
Nar	ne of Assoc	iated Broker	or Dealer										
			ed Has Solici										
(Ch	eck "All St	ates" or chec	k individual	States)	••••••								All States
[AL		[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	(FL)	[GA]	(HI)	[ID]
[IL]		[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[M		[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]		[SC]	[SD] if individual	[TN]	[TX]	[UT]	[VT]	[VA]	[VA]	[WV]	[WI]	[WY]	[PR]
run	i Name (La:	st manie mist,	ii iiidividuai	,							_		
Bus	siness or Re	sidence Add	ress (Number	and Street,	City, State	, Zip Code)							
Nar	ne of Assoc	ciated Broker	or Dealer				•						
Stat	tes in Whic	h Person List	ed Has Solic	ited or Intend	ds to Solici	t Purchasers							
(Ch	eck "All St	ates" or chec	k individual	States)						•••••			All States
[AL	4	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	1	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[M	F]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	l	[SC]	[SD]	[TN]	[TX]	[TU]	[VT]	[VA]	[VA]	[WV]	[WI]	[WY]	[PR]

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	Type of Security		Aggregate	Amo	unt Already
			Offering Price		Sold
	Debt	\$		\$	
	Equity		20,000	\$	20,000
	Common Preferred				
	Convertible Securities (including warrants)	\$		\$	
	Partnership Interests				
	Other (Specify)				
	Total		20,000		20,000
	Answer also in Appendix, Column 3, if filing under ULOE.				
<u>!</u>	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
			Number	A	ggregate
			Investors		ar Amount Purchases
	Accredited Investors		53	\$	20,000
	Non-accredited Investors		0		
	Total (for filings under Rule 504 only)	-			
	Answer also in Appendix, Column 4, if filing under ULOE.				
	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		Type of Security	Doll	ar Amount Sold
	Type of Offering		Security		Doid
	Rule 505			\$	
	Regulation A	_			
	Rule 504	_			
	Total				
۱.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees			\$	
	Printing and Engraving Costs			\$	
	Legal Fees			\$	
	Accounting Fees				
	Engineering Fees			\$	
	Sales Commissions (specify finders' fees separately)			\$	
				Œ	
	Other Expenses (Identify)			ъ	

C OFFICIAL PROOF WINDS OF	NATIONAL PARTITIONS AND	VOR OR PROCEEDS		,
b. Enter the difference between the aggregate offering price given in re in response to Part C – Question 4.a. This difference is the "adjusted	esponse to Part C - Question 1 and	d total expenses furnished	\$	20,000
5. Indicate below the amount of the adjusted gross proceeds to the issuer u If the amount for any purpose is not known, furnish an estimate and o payments listed must equal the adjusted gross proceeds to the issuer set f	check the box to the left of the e	stimate. The total of the		
		Payment to Officers, Directors, & Affiliates	_	rment To Others
Salaries and fees		□ s	□s	
Purchase of real estate		□ s		
Purchase, rental or leasing and installation of machinery and equipment		□ s	□ s	
Construction or leasing of plant buildings and facilities		□ s		
Acquisition of other businesses (including the value of securities involved in in exchange for the assets or securities of another issuer pursuant to a merger)		□ \$	□ s	
Repayment of indebtedness		□ s		· ·
Working capital		□ s	× \$	20,000
Other (specify):		□ s	□s	
		□ s		
Column Totals		⋈ \$0.00		
Total Payments Listed (column totals added)		× \$	20,000	
	ERAL SIGNATURE			
The issuer had duly caused this notice to be signed by the undersigned duly an undertaking by the issuer to furnish to the U.S. Securities and Exchange C non-accredited investor pursuant to paragraph (b)(2) of Rule 502.				
Issuer (Print or Type) Bighorn Air, Inc.	La Allem	mand	Date August /2	, 2004
Name of Signer (Print or Type) Daniel Drummond	Title of Signer (Print or Type) Vice President			

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)